

# MEMORANDUM

**DATE:** March 20, 2020  
**FROM:** MedPOINT Management on behalf of our managed IPAs/Medical Groups  
**SUBJECT:** TELEHEALTH SERVICES & CORONAVIRUS (COVID-19)

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## Do You Have Questions?

We understand that Providers are trying to address a multitude of concerns at this time, including caring for patients related to Coronavirus (COVID-19) in addition to balancing the needs of entire patient populations and ensuring the safety of your office staff. To that extent, we want to remind our Primary Care Providers (PCPs) that they are still required to attend to assigned Members whether in-person, telephonically or via telehealth.

**If any Primary Care, Specialty Care or Ancillary Provider (PCP/SCP/ANC) is unable to provide services to Members due to temporary office closure, please ensure that the appropriate notification is submitted to MPM on behalf of our Client IPAs. Notifications should be submitted via email to [ProviderServices@medpointmanagement.com](mailto:ProviderServices@medpointmanagement.com).**

Please be advised that effective March 17, 2020, the Department of Health and Human Services' (HHS) Office for Civil Rights (OCR) has waived potential HIPAA penalties for good faith use of telehealth during the current nationwide public health emergency due to COVID-19.

Please find attached an FAQ outlining the telehealth guidance implemented by MedPOINT Management (MPM) on behalf of its Clients.

**PLEASE NOTE:** COVID-19 is a mandated reportable condition by law in accordance with Title 21 Health and Safety Code. Providers must report positive COVID-19 lab results to public health departments within the Member's jurisdiction, within one day. Additionally, please report this information to MPM via email at [sopi@medpointmanagement.com](mailto:sopi@medpointmanagement.com) so that mandatory reporting can be completed at the IPA level as well

## **MEDPOINT MANAGEMENT (MPM): TELEHEALTH SERVICES & COVID-19 FREQUENTLY ASKED QUESTIONS**

MedPOINT Management (MPM) has outlined important answers to our Providers' questions regarding the utilization of telehealth services. Telehealth is becoming an increasingly significant tool allowing patients to connect with their health care providers by eliminating the need for an in-person visit, and thereby reducing both participants' risk of exposure to COVID-19.

Please note: The originating site requirement associated with telemedicine modalities has been waived in conjunction with the Public Health Emergency (PHE) declaration by the President and the Department of Health and Human Services (HHS) Secretary. Health care providers must still comply with State telehealth laws and regulations, including professional licensure, scope of practice, standard of care, patient consent (<https://www.cchpca.org/>) as well as other payment requirements for non-Medicare beneficiaries. It must also be emphasized that Members **must** consent prior to receiving a telehealth consultation and that consent must be documented. The authorization process will remain the same when requesting services; regardless of whether services are being provided in-person or via telehealth.

### **Q. Can I provide telehealth services to reduce the risk of exposure to COVID-19?**

A. Yes. IPAs and Medical Groups managed by MPM have adopted DHCS ([https://www.dhcs.ca.gov/services/medi-cal/Documents/mednetele\\_27966\\_m01o03.pdf](https://www.dhcs.ca.gov/services/medi-cal/Documents/mednetele_27966_m01o03.pdf)) and CMS guidelines (<https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth>) related to the provision of telehealth services. If a Provider determines that the service is medically appropriate to provide via telehealth and the Member has consented to receive the service via telehealth, Providers may render telehealth services following these guidelines. These guidelines may be updated frequently in this changing environment, so Providers are encouraged to refer to the links often for the most updated information.

### **Q. Am I qualified to provide telehealth services to patients at their homes?**

A. Yes. You are qualified to provide telehealth services that are within your scope of practice and consistent with Medicare benefit rules.

### **Q. What types of telehealth services can I offer?**

A. Providers may only provide particular services that are considered to be clinically appropriate based upon evidence-based medicine and/or established practices that are appropriate to be delivered via telephone consultation or audio-visual, two-way, real-time communication. If there are treatments, exams, procedures or other services that cannot be adequately provided via telehealth, those services are not eligible to be provided using this method. Additionally, CMS maintains a list of services that are applicable to Medicare telehealth for your guidance: (<https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes>).

Please note: On-site services conducted via video or through a window in the clinic suite are not considered as telehealth services.

### **Q. Do I need to be at an authorized healthcare facility to provide telehealth services?**

A. No. Under the expansion of Medicare telehealth coverage during the COVID-19 crisis, Providers can temporarily furnish telehealth services from their homes.

**Q: How long does the telehealth waiver last?**

A: The telehealth waiver will be effective until the Public Health Emergency (PHE) declared by the HHS Secretary on January 31, 2020 ends.

**Q. Can hospitals, nursing homes, home health agencies or other healthcare facilities bill for telehealth services?**

A. No. Billing for telehealth services is limited to professionals.

**Q. Is the Member's consent required prior to receiving telehealth?**

A. Yes. State law requires the health care provider initiating the use of telehealth needs to inform the Member, obtain consent, and maintain appropriate documentation. If a Member refuses to have services provided via telehealth, the Member has a right to obtain the services in person.

**Q. What are the minimum documentation requirements for a telehealth visit?**

- A. The documentation in the Member's medical record should include the following:
- Notation that patient consented to the consult held via telephone
  - Names of all people present during a telemedicine consultation and their role
  - Chief complaint or reason for telephone visit
  - Relevant history, background, and/or results
  - Assessment
  - Plan and next steps
  - Total time spent on medical discussion

**Q. Are different rates paid for services provided through telehealth vs. the same services provided in-person?**

A. No. The rates are the same for the professional medical services provided by telehealth or in-person. It is important to remember when billing telehealth services for Medi-Cal Members to use a POS 02 (telehealth) and a modifier 95 for services provided via synchronous, interactive audio and telecommunication systems.

For Medicare/Commercial Members, please use POS 02, modifier GT and refer to CMS billing guidelines (<https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>).

**Q. Do I need to obtain authorization for telehealth services?**

A. For services that normally require authorization, the standard pre-authorization requirements apply regardless of whether the services are being provided via telehealth or in-person. **Your current authorizations are valid, and you do not need to do anything further to change these authorizations.** You do not need to request a new auth with a POS 02.

Please follow your normal authorization processes with your contracted IPAs and contact them directly with any questions or concerns about telehealth. Services provided in an Urgent Care or Emergency Department setting do not require prior authorization. When submitting claims for authorized services, medical records must be attached via the MPM web-portal to the approved authorization. For assistance please contact Provider Network Operations ([ProviderServices@medpointmanagement.com](mailto:ProviderServices@medpointmanagement.com)) or the IT Help desk ([ITSupport@medpointmanagement.com](mailto:ITSupport@medpointmanagement.com)).

**Q. What types of technology products do I use to provide telehealth diagnosis or treatment related to COVID-19?**

A. During the nationwide public health emergency, the Office for Civil Rights (OCR) at the Department of Health and Human Services (HHS) is exercising its enforcement discretion to not impose penalties for noncompliance with the HIPAA rules and regulations in connection with the good faith provision of telehealth using such **non-public facing** audio or video communication products. This exercise of discretion applies to telehealth provided for any reason, regardless of whether the telehealth service is related to the diagnosis and treatment of health conditions related to COVID-19.

Please note: Providers are encouraged to notify Members that these third-party applications potentially introduce privacy risks, and Providers should enable all available encryption and privacy modes when using such applications.

Providers may use the following **non-public facing** popular applications that allow for video chats for telehealth services:

- Apple FaceTime
- Facebook Messenger video chat
- Google Hangouts video
- Skype

Providers may **not** use the following **public facing** applications for telehealth services:

- Facebook Live
- Twitch
- TikTok
- similar video communication applications

The list below includes some vendors that represent that they provide HIPAA-compliant video communication products and that they will enter into a HIPAA Business Associate Agreements (BAA).

- Skype for Business
- Updox
- VSee
- Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet

Please note: OCR has yet to review the BAAs by these vendors and therefore; this list, does not constitute an endorsement, certification, or recommendation of specific technology, software, applications, or products.

Thank you very much for continuing to care for our mutual Members during these difficult times. We appreciate your dedication and collaboration. Should you have any additional questions related to telehealth visits coverage please feel free to contact our Provider Network Operations Department via email at [ProviderServices@medpointmanagement.com](mailto:ProviderServices@medpointmanagement.com).