## **Telephone Evaluation Guidelines—UPDATED 5/19/2020 (updates in RED)**

Physicians continue to receive a large number of patient calls related to COVID 19 and other health issues. These services may be billed if documented in the medical record. These are <u>not</u> E/M or video visits. Rather, the codes apply to <u>telephone evaluations</u>.

For ALL payers except Medicaid:

99441 – 5-10 minutes of medical discussion

99442 – 11-20 minutes of medical discussion

99443 – 21-30 minutes of medical discussion

- The call may be initiated by the patient or the provider for the duration of the Public Health Emergency under updated CMS guidance.
- These can only be reported by providers licensed to render E/M services
- The patient may be new or established to the practice for the duration of the Public Health Emergency under updated CMS guidance.
- The visit can't be related to an E/M service provided in the *last 7 days*
- The visit can't trigger a face-to-face visit within 24 hours or the soonest available appointment

Note: In order to bill for the service, continue to document the call in an eCW telephone encounter <u>using the workflow</u> detailed below.

The documentation must include: the patient's verbal consent, the approximate start and stop time of the call, and a brief note on the content of the discussion with the patient.

• Use code G2012 for Medicare patients <u>only</u> when the telephone evaluation <u>is a brief check in requiring minimal</u> evaluation.

## For Medicaid:

As of LA Medicaid notice 5.15.2020

Effective June 1, 2020 DOS, **LA Medicaid** will <u>no longer accept the codes 99441,99442 and 99443</u> for telephone evaluations.

\*\*NOTE\*\* Providers using eCW can still continue their current workflow using these codes for ALL payers, TUMG billing will make the necessary edits on the backend prior to sending out claims.

The appropriate E/M codes to represent telephone calls, beginning June 1, are the <u>outpatient office visit</u> <u>codes 99201-99215</u>. Please note, the elements of service and documentation must reflect the outpatient components for these services to support billing.

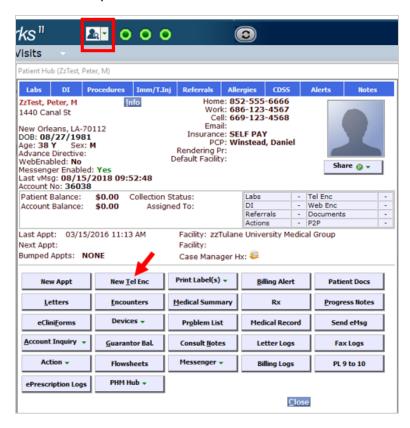
Published Medicaid Bulletin 5. 15.2020LA Medicaid and LA Managed Medicaid only:

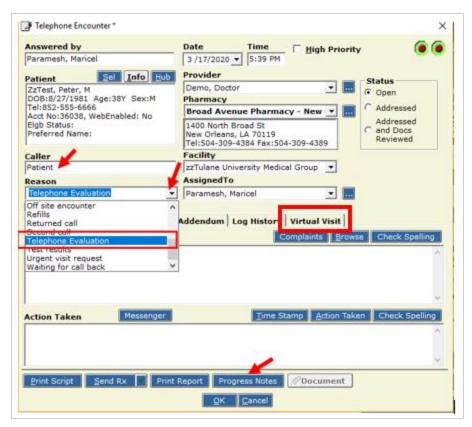
"Effective with dates of service on and after June 1, 2020, "Telephone Services" represented by CPT codes 99441, 99442, and 99443 will no longer be payable under the Professional Services or Outpatient Hospital programs. Claims for audio-only interactions must be coded using the appropriate procedure codes describing the service, for example evaluation and management services, with the telehealth modifier and place of service appended."

## **Ecw Workflow for documenting and billing for Telephone Evaluations**

TELEPHONE EVALUATION (BILLABLE)

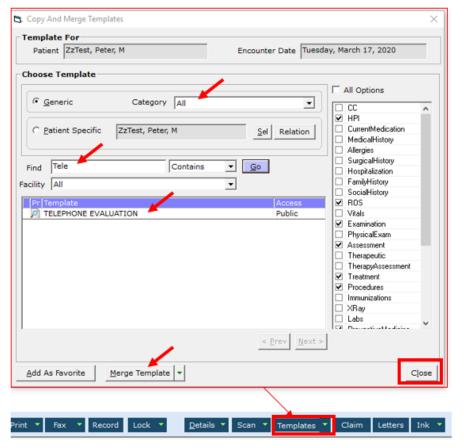
Patient Lookup > Hub > New Tel Enc





Complete the following fields:

- Caller who initiated the call
- Reason Use drop-down and select from list "Telephone Evaluation"
- Click on the "Virtual Visit" tab then click the "Progress Notes" button on the bottom to switch over to the progress notes view. Doing this will allow you to access your templates.



Click **Templates** button.

To complete required documentation, please use the **Telephone Evaluation** template created:

- Category: set to ALL
- Find: Type "Telephone Evaluation"
- Click to select the Telephone
  Evaluation template.
- Click Merge to merge the template to your progress note.
- Close this window to return to progress notes view.
- Complete all template fields.



Remember to add a Diagnosis Code so it can be attached to your CPT code in the billing window.

From the billing window, click "Add E&M" and click on **Telephone Evaluation** and choose appropriate code to drop.

